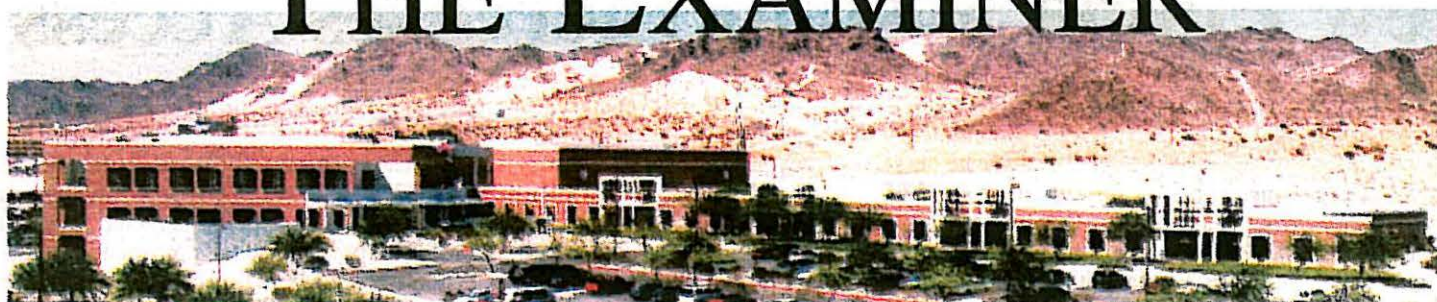




THE EXAMINER



Robert E. Bush Naval Hospital, Twentynine Palms, California

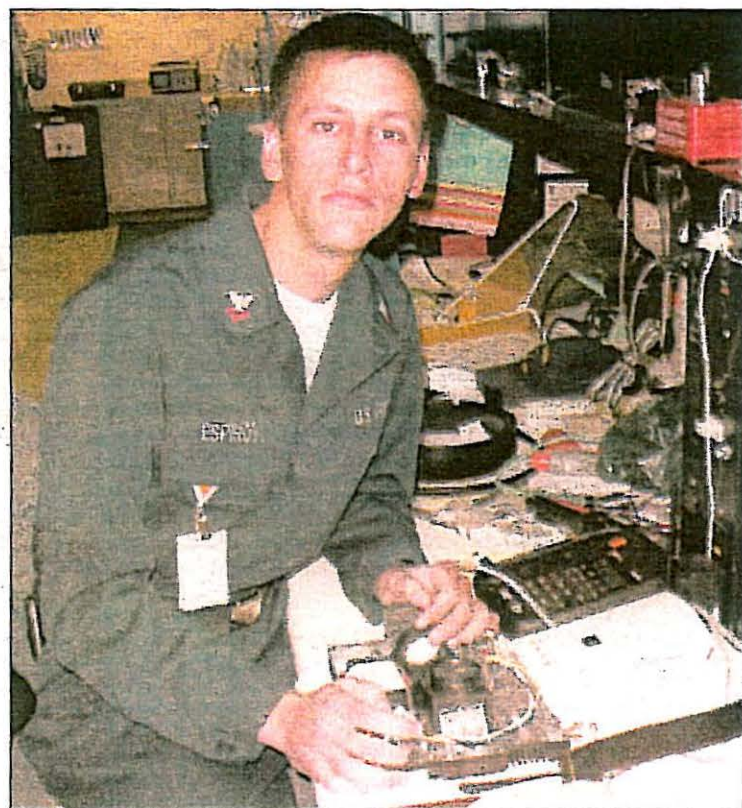
Volume 11, No. 4

"Serving with Pride and Professionalism"

April 2003

Spotlight on...

Our Newest Biomedical Repair Technician



HM2 Andres "Andy" Espinosa.

By Dan Barber, Public Affairs Officer
Robert E. Bush Naval Hospital

Naval Hospital Twentynine Palms welcomes one of its newest members, Petty Officer 2nd Class Andres Espinosa, Advanced Biomedical Repair Technician.

Espinosa is a most welcome addition to the command. One of the biomedical repair technician billets that Espinosa has come to fill has been gapped since November when Petty Officer 2nd Class Stephen Drumsta transferred from the command.

Espinosa graduated from high school in Tarpon Springs, Florida in 1991 and almost immediately joined the Navy in July of 1991. Espinosa contacted the Navy before graduating from high school and was placed in the Delayed Entry Program. While in high school, Espinosa participated for three years in Junior Varsity and Varsity Wrestling. He also volunteered with his community's volunteer fire department. "My experience with the volunteer fire department helped me decide to become a Corpsman because I really liked the work," said Espinosa.

After Espinosa attained his Fleet Marine Force training at Camp LeJeune, North Carolina, his duty stations included: Echo Company 2nd Battalion, 2nd Marines at Camp LeJeune; Parris Island while attached to Naval Hospital Beaufort, South Carolina; Gulf Port Mississippi; Biomedical Repair School at Sheppard Air Force Base in Wichita Falls, Texas; Camp Lejeune Naval Hospital; Fleet Hospital at Guantanamo Bay, Cuba; Advanced Biomedical Repair Technician School, and then here.

Please see **BIOMEDICAL TECHNICIAN** on page 7

Highlights...

An updated telephone access system at the Naval Hospital will help our patients get access to the right people and increase the efficiency of obtaining care. *See page 2*

Family Centered Maternity Care (FCMC) Advisory Board made up of members of the community and hospital staff is meeting monthly to discuss the hospital's perinatal and children's health care services. *See page 2*

Thirty percent of female US military veterans as well as current, active duty (AD) women report having been raped or suffered a rape attempt during their military service. Currently, more than three-fourths of women in the military report some type of sexual harassment during their military career. *See page 5*

The Examiner can now be viewed online at: www.nhttp.med.navy.mil

For comments drop an e-mail to: d.barber@nhttp.med.navy.mil

Ombudsmen Deal With Many Issues

By Dan Barber, Public Affairs Officer
Robert E. Bush Naval Hospital

Where does an Ombudsman turn to for moral support when their spouse is unexpectedly deployed?

"Knowing that my husband knows his job and is professional and confident in what he does, gives me a great deal of comfort," said Monica Shaw, Naval Hospital Twentynine Palms Ombudsman and Key Volunteer.

Shaw was appointed as the Robert E. Bush Naval Hospital's Ombudsman last

year in November when the previous Ombudsman transferred with her husband.

Shaw has been married for nine years to Petty Officer 2nd Class Jon Shaw of the hospital's Physical Therapy department. They have two children, Austin, 6 and Natalie, 3.

Petty Officer Shaw was deployed to Kuwait in February.

"As a spouse of a deployed service member things can at times be challenging. Personally, I find staying busy with activities such as the Parent Teacher Organization, LINKS and with events at the Naval Hospital helps," said Shaw. "The job

Please see **OMBUDSMAN** on page 7



Presort Standard
U.S. POSTAGE
PAID
YUCCA VALLEY
CA 92284
PERMIT NO. 40

Commanding Officer
Naval Hospital Public Affairs Office
Box 788250 MAGTFC
Twentynine Palms, CA 92278-8250

New Phone System Increases Access to Care

An updated telephone access system at the Naval Hospital will help our patients get access to the right people and increase the efficiency of obtaining care.

"This new phone system isn't designed to distance ourselves from our patients; it has been designed to better manage their health care needs," said Lt.j.g. Brian Hower, a Health Care Administrator in the Clinical Services Directorate.

When patients call into the hospital they will hear the message, Welcome to the Naval Hospital Twentynine Palms, Outpatient Services directory. If this is an emergency, hang up and dial 911. Otherwise, please be patient with this new system designed to better manage your health care needs. Our hours of operation are 0730 - 1600, Monday through Friday, excluding holidays. The caller will then be directed to select one of several options:

Press (1) to leave a message for your Primary Care Manager or speak with our Nurse Advice Line. The hospital uses a Nurse Advice Line to assist your access to health care.

Registered Nurses handle all initial telephone calls for the hospital's providers and also give advice regarding health care concerns of a non-emergent nature. On many occasions the Nurses can even save you an unnecessary trip to the hospital.

Press (2) to schedule or cancel an appointment. If you don't know who your Primary Care Manager is, let the appointment clerk know, they will be happy to assist you.

Press (3) for the hospital's information desk (Quarterdeck).

Press (4) to speak with the Customer Relations Officer.

"The staff of the Naval Hospital is constantly striving to improve our services to our customers through Process Improvements such as this new phone system," said Hower. "As with all new systems there may be some tweaking necessary, be assured that this necessary to provide the best health care access possible," added Hower.



Naval Hospital Twentynine Palms Advisory Board Members and some of their children recently met for the first time at the hospital. Members shown (not in order) are: Jody Ray, Kristen Razvillas, Tracey Novak, Michelle Reed, Yvonne Brown, Carrie Singh, Marine Captain Naomi Hawkins, Petty Officer 3rd Class Patti Christopher and Lt. Carrie Jones. Not pictured is Lt. Cmdr. Meggan McGraw.

Advisory Board Shaping Health Care at Hospital

A Family Centered Maternity Care (FCMC) Advisory Board made up of members of the community and hospital staff is meeting monthly to discuss the hospital's perinatal and children's health care services. "The objectives of this board are to broaden the hospital's perspectives on the needs and attitudes of the community, allow us to be better listeners to our consumers' requests, and to provide a time to work together to solve problems and initiate program changes as they relate to health care services," said Lt. Carrie Jones a Physician at the hospital.

Eight family members attended the first meeting recently where the board member's roles were identified and some ideas to improve service offerings were discussed. "The meeting was extremely positive, insightful and will be a great forum for us to work together with the community to ensure that we are providing a family-centered health care focus and experience", said Lt. Cmdr. Meggan McGraw, (NC), head of the Maternal Infant Nursing Department at the hospital.

If you are interested in becoming a FCMC Advisory Board member, please fill out the form located in the clinics or call McGraw at 830-2258 or send an e-mail to m.mcgraw@nhp.med.navy.mil.

Kick the habit and learn to become tobacco free!

The Robert E. Bush Naval Hospital Health Promotions Program offers tobacco cessation classes in the hospital.

Classes are offered at two convenient times of noon and 5:30 p.m.

To sign up, call Health Promotions at 830-2814.

The next set of tobacco cessation classes will start Apr. 22. Call now before it all goes up in smoke!

Upcoming Diabetes Class Schedule

The Internal Medicine Clinic of the Robert E. Bush Naval Hospital offers a series of "Diabetes Self-Management Classes."

The schedule of classes is as follows:

Oral Diabetes Medicines. Thursday, April 17.

Exercising to Improve Diabetes. Thursday, May 22.

Taking Care of Your Feet. Thursday, June 19.

All classes are held in the Family Practice Clinic Classroom 3.

Anyone with diabetes or interested in learning more about diabetes is welcome to attend.

For more information call Lt. Julie Lundstad at 830-2175.

Published by Hi-Desert Publishing, a private firm in no way connected with the Department of Defense, the United States Marine Corps, United States Navy or Naval Hospital, Twentynine Palms under exclusive written contract with the Marine Air Ground Task Force Training Command. The appearance of advertising in this publication, including inserts or supplements, does not constitute endorsement by the Department of Defense, the United States Marine Corps, the United States Navy or Hi-Desert Publishing of the products or services advertised. Everything advertised in this publication shall be made available for purchase, use, or patronage without regard to race, color, religion, sex, national origin, age, marital status, physical handicap, political affiliation, or any other non-merit factor of the purchaser, user or patron. If a violation or rejection of this equal opportunity policy by an advertiser is confirmed, the publisher shall refuse to print advertising from that source until the violation is corrected. Editorial content is prepared by the Public Affairs Office, Naval Hospital, Twentynine Palms, Calif.

Commanding Officer

Captain Lynda A. Salmond, MSC, USN

Executive Officer

Captain Alan R. Rowley, MC, USN

Public Affairs Officer/Editor

Dan Barber

Staff photographer

HM3 (SS/FMF) Matthew S. Shaver, USN

The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

How to reach us...

Commanding Officer Naval Hospital
Public Affairs Office
Box 788250 MAGTFTC
Twentynine Palms, CA 92278-8250
Com: (760) 830-2362
DSN: 230-2362
FAX: (760) 830-2385
E-mail: d.barber@nhp.med.navy.mil
Hi-Desert Publishing Company
56445 Twentynine Palms Highway
Yucca Valley, CA 92284
Com: (760) 365-3315
FAX: (760) 365-8686



Here's to Your Health...

April is Sexual Assault Awareness Month!

By Martha Hunt, MA, Health Promotion Coordinator
Robert E. Bush Naval Hospital

Thirty percent of female US military veterans as well as current, active duty (AD) women report having been raped or suffered a rape attempt during their military service. Currently, more than three-fourths of women in the military report some type of sexual harassment during their military career.

Unwanted sexual contact, such as touching or fondling, is reported by over half of all AD women. More than one third the women who reported a rape attempt or a completed rape have been raped more than once, while 14 percent of rape or rape attempt victims reported having been gang-raped. Over 7 of AD women who are raped do not report the incident to a ranking officer. Some women don't report because they didn't know how too and some sadly believe that rape is to be expected in the military.

Many women in the military change their behaviors to cope with the threat of sexual assault by becoming less friendly, avoided eye contact and appearing more masculine. Some AD women socialize only with other women or get a boyfriend to avoid being sexually harassed. Some carry weapons off duty, while others move off base because they want to feel safer or want to have leisure time without being sexually harassed.

Research has shown that women who joined the military at age 19 or younger, who were

of enlisted rank or who experienced childhood physical or sexual violence were more likely to be raped during military service. Rape perpetrators were frequently non-commissioned officers and peers of similar rank. They were often under the influence of drugs or alcohol at the time of the attack.

Work environments that allow inappropriate sexual conduct can significantly increase a women's risk of rape. In hostile environments, defined as environments where uninvited sexual teasing or remarks, pressure for dates and other sexual gestures are allowed to occur, the odds of rape are six times greater than on work environments where inappropriate sexual behavior is not allowed. If risk factors for rape can be identified, then it's possible to improve female AD' safety. Military supervisors are working to promote a healthy work environment for women by requiring greater accountability of male AD for their behavior.

If you are sexually assaulted, you have rights and options. If you are raped, go to a safe place as soon as possible such as the hospital ER or PMO. If you choose to report the crime, the health care providers in the ER will need to collect evidence of the crime so that legal authorities can prosecute successfully. Do not clean yourself in any way since the nurse or doctor will need to look for evidence of the crime. Try to remember and write down any details about the crime. Even if something seems insignificant, any detail may help to convict the rapist.

Remember, you have the right not to be sexually assaulted and that sexual assault is not an expected part of military life. It violates not only you as a person but also violates core values, standards of professional behavior and personal discipline.

Babies Soon to be Greeted in New Surroundings at Naval Hospital

Delivering babies at Naval Hospital Twentynine Palms will be a whole new experience in late spring when the hospital opens up its new Maternity Unit, "Desert Beginnings."

The new unit will have seven state of the art Labor, Delivery, Recovery, and Postpartum (LDRP) suites. "Its going to have a home-like atmosphere that will make having a baby a more comforting and memorable birth experience," said Lt. Cmdr. Meggan McGraw, Nurse Manager of the unit.

The new unit is one of Navy Medicine's biggest initiatives to support a more "Family-Centered" health care program. Within the birth suites there will be new amenities to include brand new furniture, oak flooring, and state of the art medical equipment. Families will have a private room throughout their stay and their newborn will be able to stay in the room with them.

The new unit is expected to open in late spring of this year. "We are very excited to be able to offer our military families the comforts and conveniences this new unit will provide," said McGraw.

A New Look...



Tony Strong, left, of the Procurement Management Department and John Traynor, right, of Facilities Maintenance put together the new furniture in the Emergency Medicine Department Waiting Room. New attractive and comfortable furniture has been placed throughout the hospital for the benefit of staff and patients.

You're Getting Old When...

You get cable for the Weather Channel.

BREASTFEEDING SUPPORT GROUP

Sponsored by: Maternal Infant Ward & Breast Center

WHAT BETTER WAY TO FIND OUT ABOUT:

- *Latching On
- *Meeting other new mothers
- *Sore Nipples
- * Breast Engorgement
- * Milk Collection & Storage
- *Sexuality
- *Back to Work

LOCATION, DATE & TIME:

Naval Hospital Twentynine Palms
Classroom 3 (behind Family Practice Clinic)
Every Monday 10 a.m. -noon
Breast Education Center 830-2501

Hospital Barracks Receives Official Recognition...

**Naval Hospital
Hard Chargers..**

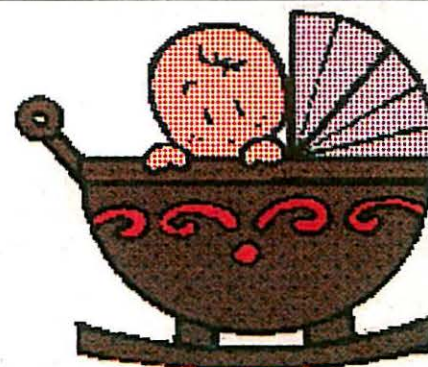


Captain Lynda A. Salmond, Commanding Officer, Robert E. Bush Naval Hospital and Lt. Cmdr. Kimberly Zuzelski along with staff from the hospital's Bachelor Enlisted Quarters receives the Admiral Zumwalt Five Star Award at a recent ceremony held in Nashville, Tenn.

**Lt. Cmdr. Stacy
Volkert, MC,
Mental Health
Department is
promoted.**



**Lt. Cmdr. Kimberly
Zuzelski, (MSC)
Nutrition
Management
Department Head
is promoted.**



JOURNEY INTO MOTHERHOOD

Feeling Overwhelmed, Scared, Alone, Sad, Frazzled?

Or just want to meet other new moms?

You're not the only one!

Come join us to talk, share, and meet others.

Support Group for Expectant and New Moms

Finding Solutions through Education and Support

Where: Conference Room - Mental Health Clinic

Every Thursday afternoon

Time: 12:30 to 2 p.m.

Group leaders: Beverly Dexter, PhD 830-2935

Janet Hamilton, MSW 830-2584

Patient Safety...

Goal Number Three: Use of high-alert medications

Lt. Daniel Anthony, NC, PACU
Robert E. Bush, Naval Hospital

As you may recall, we introduced the first two national patient safety goals in our February and March patient safety updates.

First, we discussed how the hospital developed a standardized method for accurately identifying patients that included verifying the patient's entire name and the last four digits of the sponsor's social security number.

Second, we focused on improving the effectiveness of communication among caregivers to include a policy wherein the nurse receiving telephone orders from a provider writes down those orders and then verbally "reads-back" the order list to the provider.

Additionally, we developed and improved upon our list of standard abbreviations, acronyms, and symbols used throughout the

organization.

This month we put the focus on patient safety goal number three.

The third national patient safety goal addresses the use of high-alert medications. Within this goal, we focused on eliminating concentrated electrolyte solutions such as potassium and sodium chloride solutions from patient care areas and standardizing and limiting the number of drug concentrations available here at the Naval Hospital.

Our pharmacy conducted an audit that confirmed that no concentrated electrolyte solutions are being maintained anywhere in our facility except within the pharmacy. Also, an official list of available electrolyte concentrations within the pharmacy was developed. Highly concentrated electrolyte solutions can be fatal if administered inappropriately and therefore are now kept in a central location in the pharmacy.

Finally, we would like to update all concerned that Project "Speak-Up" has received excellent responses from our beneficiaries. Specific items included a request from our patrons to install a ramp from the front parking lot to the pediatric clinic entrance. The command is looking into this matter to provide funding for this valuable project.

As the year progresses here at Naval Hospital Twentynine Palms, we would like to thank all of our beneficiaries for their comments and feedback as we endeavor to provide the best and safest healthcare in the fleet.

Project "Speak-Up" has received excellent responses from our beneficiaries. Specific items included a request from our patrons to install a ramp from the front parking lot to the pediatric clinic entrance. The command is looking into this matter to provide funding for this valuable project.

Improving Health Care Quality; By Reducing Medical Errors

By Operations Specialist 2nd Class Wendy Kahn, National Naval Medical Center Public Affairs

BETHESDA, Md. (NNS) -- According to a 1999 report released by the Institute of Medicine, as many as 100,000 deaths occur each year in the United States because of medical errors and other adverse events which affect patient safety. Well-publicized cases such as the error with the recent heart-and-lung transplant in North Carolina have increased the national focus on patient safety.

Growing concerns for patient safety have raised public awareness of the need to reduce medical errors and to improve the quality of health care. To this end, the Institute for Healthcare Improvement (IHI) has established an international collaborative of more than 80 health care institutions, committed to achieving a higher level of quality and patient safety.

The National Naval Medical Center (NNMC), along with four other naval hospitals, is an active participant in this effort, known as IMPACT.

IMPACT is a network of change-oriented health care organizations seeking a new level of improvement, according to Capt. Wayne McBride, special assistant for Command Performance and Evaluation.

The collective experiences and knowledge of IMPACT members, combined with the expertise of the IHI faculty, have given us a potent framework for achieving and sustaining improvement. IMPACT members seek participation in one of five critical domains - office practice, workforce development, critical care settings and patient safety.

The idea for NNMC to join IMPACT began with Cmdr. Frederick Foote. As head of the NNMC Quality Objective Team, his vision was to see the hospital linked to the national movement on quality improvement.

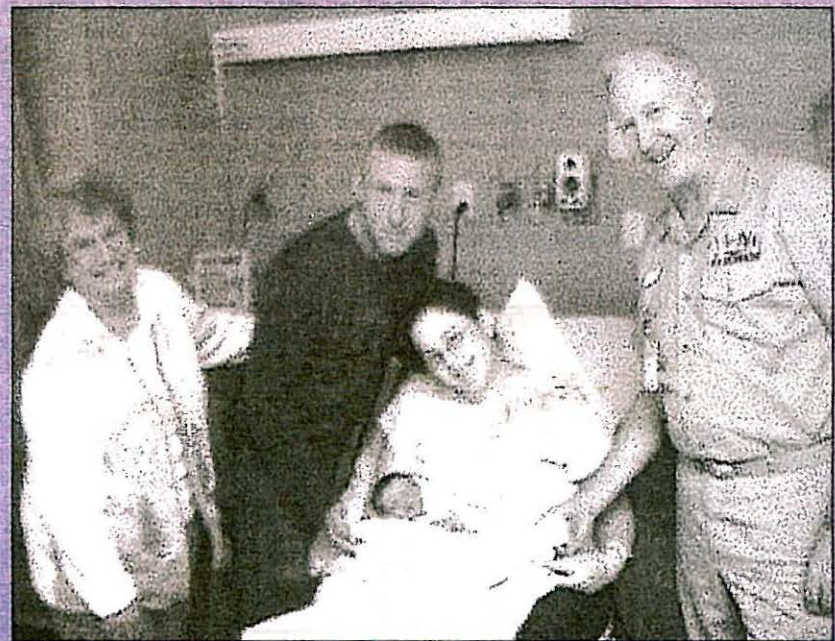
"As the flagship of Navy medicine, I knew NNMC should be leading the armed forces nationwide in IHI's effort of implementing programs to minimize mistakes," recalls Foote.

NNMC's role in the IMPACT patient safety domain focuses on several areas within the hospital. On the internal medicine ward, the goal is to reduce adverse drug events by 75 percent.

"An audit of our patient records found approximately one out of four inpatients had some form of an adverse drug event during their hospitalization," says McBride.

To minimize errors in medication administration, NNMC's IMPACT members are

Baby Gets Blanket...



Rosemarie Durkton, coordinator for the Coachella Valley chapter of Project Linus, recently visited the Naval Hospital. During this visit several homemade blankets were donated for distribution to newborn children or sick inpatient children. The Project Linus idea was born in 1995 in Denver. The project calls on volunteers to make homemade blankets for hospitalized ill children and newborn babies. A homemade blanket from the project was donated to Mackenzie Elizabeth Goldin, born March 19, 2003, who is surrounded from left to right by, Rosemarie Durkton; her parents, Pfc. Adam Goldin and Michelle Goldin; and Capt. Alan R. Rowley, Executive Officer, Robert E. Bush Naval Hospital.

Navy Surgeon General Urges Blood Donation

From Bureau of Medicine and Surgery Public Affairs

WASHINGTON (NNS) -- The Navy Surgeon General is looking for a few good blood donors to help prevent a shortage of type-O blood.

"While all blood types are needed, O-negative and O-positive donors are desperately needed," said Navy Surgeon General Vice Adm. Michael L. Cowan.

Type O-negative is the universal donor and can give blood to any other blood type. About 8 percent of the U.S. population has blood type O-negative. O-positive also has wider use than A, B or AB blood types.

PATIENT SAFETY...

Continued from page 5

piloting a medication reconciliation tool to ensure a patient's medications are carefully continued when hospitalized and discharged.

McBride emphasizes IMPACT members are currently working within the organization to improve the climate. This is accomplished by allowing people to be at full disclosure and bringing errors to the senior leadership's attention as they occur. By doing so, the staff can correct the procedures which may have led to the error.

As part of the Patient Safety Domain, IMPACT members are reviewing the inpatient medication dispensing practices in the pharmacy. Using the failure modes and effects analysis (FMEA) approach, critical factors can be identified before they become a problem that could lead to errors.

The FMEA is a tool taken from industry, which is being applied in health care to promote system improvements. Once identified, improvements to systems are made to ensure proper medication administration continues.

Although a separate domain, NNMC's participation in Office Practice and Outpatient Settings is connected to patient safety. The goal of this domain is to revolutionize the functions of an outpatient clinic, by improving the quality of health care and maximizing efficiencies in the delivery of care.

According to Foote, IMPACT members have already introduced quality improvement efforts in the Internal Medicine Clinic. These efforts will allow patients enrolled in TRI-CARE Plus improved access to health care, evidence-based medicine, efficient clinic visits and other services that will increase patient satisfaction. If the improvements work, in Foote's opinion, they will be implemented in the other clinics at the hospital.

For NNMC, participation in the IMPACT network is proving to be a positive investment in patient care improvement. Though major challenges in our nation's health care system remain, the involvement with IHI will help it forge lasting changes through promoting the highest in patient safety and continuous quality improvement.

The U.S. Navy, Marine Corps and Coast Guard have a long-standing tradition of being the most reliable donors in the country. Since 1952, the Navy Blood Program has been an integral part of the Armed Services Blood Program, and has provided quality blood-related products and services worldwide during peace and war.

Cowan said the Navy Blood Program has an inventory of 21,000 units of frozen blood and a supply of 1,100 liquid red cells, which is provided to designated ships, as well as all Navy medical treatment facilities.

Cmdr. Michael Libby, director of the Navy Blood Program at the Bureau of Medicine and Surgery, said for people to donate, they must be in good health and be at least 17 years old. Donors must weigh at least 110 pounds and pass a physical and health history examination before donation. Any inoculations received in the eight weeks prior to donation must be identified.

Current safety regulations bar donations from personnel who lived or who were stationed in certain European countries since 1980 as a preventive measure to ensure mad cow disease isn't transmitted to others via a transfusion. This means about 25 percent of those previously eligible to donate cannot, a serious blow to blood collection capability.

Editor's Note: The deployment of the Marines and Sailors from the Marine Corps Air Ground Combat Center has caused a serious shortage in local blood supplies. All blood drives at the Combat Center are advertised in local media both on and off base. Everyone who can give blood is urged to do so at these blood drives.

Navy Medicine Afloat 9-1-1 System Takes Shape

By Journalist 1st Class Joseph Krypel, Camp Patriot

CAMP PATRIOT, Kuwait - One of the most essential contingencies the Navy in the Arabian Gulf must plan for is treating casualties. The forward-deployed medical staff of Task Force 51 (TF-51) has an innovative answer - the Navy Afloat Trauma System (NATS).

NATS creates an amphibious task force trauma network patterned after the civilian 9-1-1 emergency system. The 9-1-1 system dispatches aid from the closest location to provide quickest assistance, which is the concept behind NATS.

NATS greatly enhances operational capabilities by networking the capabilities of six "big deck" amphibious assault ships from the Atlantic and Pacific Fleets, as well as the British Royal Navy.

According to Cmdr. James Gregory, Medical Corps, TF-51's director of trauma and a prime architect of NATS, the system draws together more than 1,500 medical personnel to include medical specialists from the various ships and coordinates them to respond to emergencies in an organized manner by using a common communication network, similar to the civilian 9-1-1 system.

"Three of the U.S. big decks, along with the British Navy Hospital Ship, Royal Fleet Auxiliary (RFA) Argus, will be used as primary casualty receiving treatment ships. They'll get called into action first. The balance of the ships, all with equal capabilities, will be used in a secondary and overflow nature - basically staying in a medical stand-by mode until needed," said Gregory.

USNS Comfort (T-AH 20) will be a prime asset within NATS.

"The Comfort would serve as a primary medical treatment facility at sea for high-level care and provide an additional 1,000 bed staffing capability," said Gregory. While Comfort has many beds, Gregory explained that the amphibious assault ships are more capable of receiving the heavy air traffic that would likely be needed in a mass casualty scenario.

According to Gregory, the plan will eventually bring all seven U.S. ships and the U.K. vessel together into a 1,500-bed floating hospital that can provide a comprehensive trauma capability.

Gregory said once you have the sea-based facilities, you must have a means of taking a soldier or Marine from the field, possibly hundreds of miles away, and getting him to the best care possible.

"Starting with the field corpsman, a call would be made to a direct air support center (DASC). DASC acts as a dispatcher for medical air support to and from the battlefield," he said.

Upon receiving a call, DASC personnel dispatch air assets to the casualty location, while at the same time choose from many ground-based medical facilities near the battle front that are available, including six initial treatment facilities that travel with ground forces, called forward resuscitative surgery suites, which include a mini-operating facility. The job of these forward-deployed medical units is to stabilize patients before sending them to better-equipped facilities at sea. Then NATS takes over.

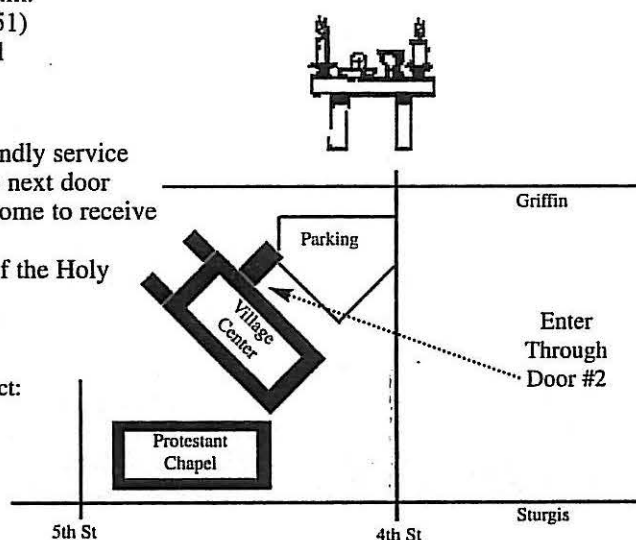
Please see MEDICINE AFLOAT on page 7

1030 Service of Holy Communion

Every Sunday at 10:30 a.m.
Village Center (Bldg 1551)
In the Meditation Chapel
(Enter door #2 then follow signs)

- * A 50-minute child friendly service
- * Nursery Care available next door
- * All Christians are welcome to receive communion
- * A weekly celebration of the Holy Eucharist

For more information contact:
Chaplain Spaulding
Command Chaplain
Robert E. Bush Naval
Hospital
830-2429



President Authorizes Two New Medals

From the Department of Defense Public Affairs

WASHINGTON - A presidential executive order signed March 12 authorizes the Department of Defense to create two new military medals for service in the Global War on Terrorism (GWOT).

The GWOT Expeditionary Medal will recognize service members who participate in an expedition to combat terrorism on or after Sept. 11, 2001. This is limited to those who deploy as part of Operation Enduring Freedom.

The GWOT Service Medal will recognize service in military operations to combat terrorism on or after Sept. 11, 2001. This is limited to Operation Noble Eagle and to those service members who provide support to Operation Enduring Freedom from outside the area of eligibility designated for the GWOT Expeditionary Medal.

The medals were recommended by Secretary of Defense Donald Rumsfeld "in response to our nation's global efforts to suppress terrorism, and the significant contributions members of the Armed Forces bring to bear on the long-term resolution of this threat.

Specific eligibility for these medals will be established by DoD award policy. The combatant commander has the authority to award the medals for approved operations to units and personnel deployed within his or her theater. Each service department will prescribe the appropriate regulations for processing and wearing of the medals.

Members of the U.S. armed forces and Coast Guard are eligible for the medals to include Reserve and National Guard activated to support approved operations.

It will take up to 12 months to produce and stock the medal in department supply systems.

BIOMEDICAL TECHNICIAN...

Continued from page 1

The process of applying for the 8479 NEC can take anywhere from a few days to years. Espinosa spent seven years as a 'quad zero.' "I have always liked tinkering with things," said Espinosa. "When I was a kid, I was always taking things apart... maybe not getting them put back together again, but I enjoyed taking them apart," he added.

"When I was at Gulfport, I was always fixing things. Then someone said why don't you put in for the Biomedical Repair School, so I did," said Espinosa. Entry to the school depends on the demands of the Navy in filling the Biomedical Repair NEC quotas. Some of the requirements to attend the school are being at least an E-3 or E-4. Espinosa was required to also complete four correspondence courses, "Matter Energy and Direct Current", "Intro to Alternating Current and Transformers", "Generator and Motors", and "Intro to solid state devices and power supplies."

The 46-week Biomedical Repair School is a Joint Military school with Army and Air Force Personnel along with Navy attending, and is divided into sections of 17 days each.

The first three sections are on electronics theory and the rest of the time is spent on clinical applications. The first five to six days of each section are spent on the academic aspect of the subject and the rest of the time is spent receiving practical experience.

In this course, Espinosa received a basic knowledge of how the many different pieces of medical equipment work. The equipment he trained on ranged from something as small as a Fetal Doppler to something as intricate as a portable x-ray machine.

Espinosa received 88 credits towards a degree in Applied Science and is eligible for a reenlistment bonus. At graduation, well-known companies such as General Electric and Stevenson International have been known to try to recruit the new graduations to come work for their companies. However, Espinosa took advantage of the Navy's reenlistment bonus and recently 're-uped' and is planning to make the Navy his career. "When I retire, then I'll let those companies know of my employment needs," he said.

One Biomedical Repair Technician at this hospital had two major companies, from both coasts of the United States, competing for his services when he retired. They were offering him very valuable incentives and bonuses for him to sign on. He opted for the company on the East Coast because that's where he wanted to live.

Espinosa is looking forward to his tour of duty here. "I wanted an operational billet, but getting orders here is fine with me," he said.

OMBUDSMAN...

Continued from page 1

of Ombudsman can be challenging, yet very rewarding," she added.

The hospital only has a handful of people deployed in support of the Iraqi operation. Some of those deployed Sailors are here on unaccompanied orders with their spouses located elsewhere. They also seek help through Shaw when they have questions or concerns about any topic.

"I am able to do research to obtain base addresses, phone numbers, and other contact information, so I can refer spouses to those who can help them further," said Shaw. "I have found that some of our spouses have a great deal of support from their own families and friends," she added.

"In my duties as the Ombudsman I get to offer help and comfort to others and that helps me deal with everyday life because it is very rewarding to me to help others," said Shaw.

In addition to the Ombudsman and Key Volunteer program the Naval Hospital also has a Family Support Network (FSN). "We're hoping more spouses come forward to be part of this great program," said Shaw. The Family Support Network is open to both military and civilian staff families.

Caroline deSomov has just taken over as the FSN Coordinator. To contact and receive further information regarding FSN or hospital events, please feel free to contact Caroline at (760) 367-5999. "As military spouses we find ourselves facing the same challenges whether our spouses are here or deployed. I am available to help and support families through this stressful time, and by doing this it also helps me get through it as well," said Shaw.

Monica Shaw can be reached by pager at 1-800-459-0827.

You're Getting Old When...

You sing along with the elevator music.

MEDICINE AFLOAT...

Continued from page 6

Gregory said NATS solves the problem of who to call by centralizing the communications from the field. Specialists at the communication center then determine the level of care required and which medical facility the patient should be sent.

According to Gregory, the optimal time patients will be on board the floating treatment facilities would be no more than 48 hours before they are either returned to duty or sent on to a higher level of care.

"We'll make everyone as comfortable as possible," Gregory reflected, "but our primary goal is to ensure that each and every patient gets the absolute best medical care that is available - be that within NATS or back in the United States."



Healthwatch...

Always Tired to the Bone? Maybe It's Chronic Fatigue Syndrome

By Aveline V. Allen, Bureau of Medicine and Surgery

WASHINGTON - Tired to the bone day after day for no reason to the point it's affecting your daily routine? Maybe it's Chronic Fatigue Syndrome (CFS).

"Everyone experiences fatigue at times, but chronic - six months or more - or severe fatigue warrant evaluation by your health care provider," said Lt. Cmdr. Mae M. Pouget, Medical Corps, Navy Medicine's general medicine specialty leader.

According to the Centers for Disease Control (CDC), CFS is an unexplained, persistent, relapsing exhaustion of new onset that is not improved by adequate rest, and affects quality of life, work, schooling, personal, and social life.

"Individuals experiencing CFS may experience fatigue so severe they are unable to perform activities of daily living such as walking from one room to another, showering,

or even combing their hair," said Pouget.

Some symptoms attributed to CFS in addition to fatigue include muscle pain, sore throat, unrefreshing sleep, difficulty concentrating, and headaches of a different type, cycle or intensity. Medical experts stress that the symptoms must be persistent or recurring six or more consecutive months, but the onset of the symptoms must have come before the actual fatigue.

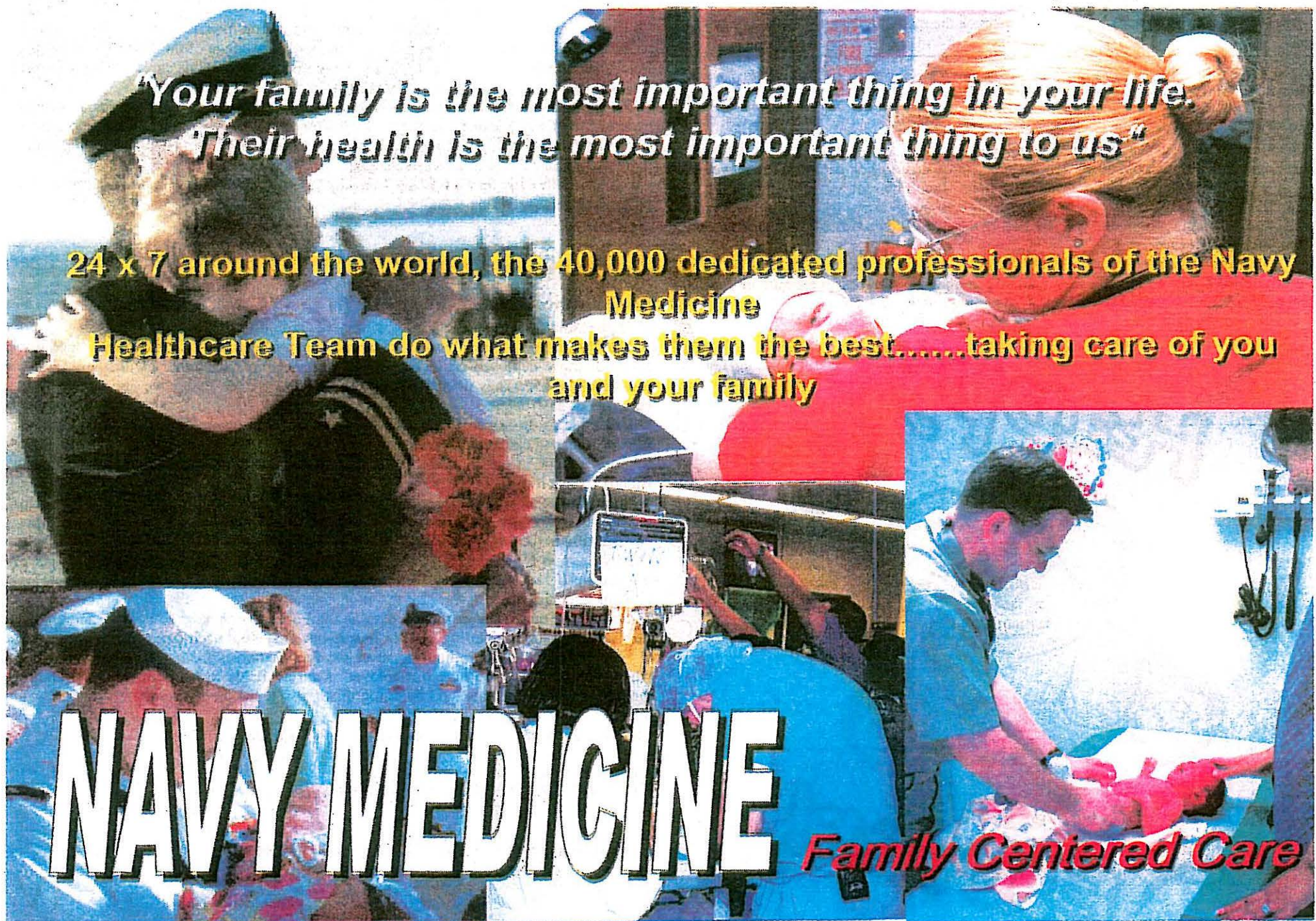
Diagnosis is difficult because these symptoms may be associated with many other medical conditions. However, in an effort to make an accurate diagnosis, your physician should review your entire medical history and perform a complete physical examination to determine if you might have CFS. In an effort to rule out any other medical conditions, experts recommend a standard series of laboratory tests on blood and urine also be done. After all testing is complete, if your symptoms cannot be linked to any other causes, a diagnosis of CFS might be made.

There is no known cure for this chronic illness, but there

are treatment options available. Medical studies show certain prescription medications may be used to improve sleep and relieve mild, generalized pain. Experts have said changes in diet and daily routines may also offer some relief.

Physicians have suggested that CFS patients pace themselves carefully and avoid unusual physical or emotional stress. Hence, a regular, manageable daily routine is the key. You may do modest regular exercise, preferably supervised by a health care provider. Other physical activities and therapies that have been beneficial for patients in combating this condition include aquatic therapy, massage, stretching, and yoga.

"I highly recommend support groups for chronic disease patients and their caregivers," said Pouget. "Meeting others dealing with similar situations helps increase understanding of the illness and may help in coping with the life changes associated with chronic disease."



*"Your family is the most important thing in your life.
Their health is the most important thing to us"*

**24 x 7 around the world, the 40,000 dedicated professionals of the Navy
Medicine
Healthcare Team do what makes them the best.....taking care of you
and your family**

NAVY MEDICINE

Family Centered Care